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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/796,880	03/09/2004	Po Yuan	308230.01	2504
	7590 07/15/200 CORPORATION	8	EXAMINER	
C/O LYON & HARR, LLP			PERUNGAVOOR, SATHYANARAYA V	
SUITE 800	300 ESPLANADE DRIVE SUITE 800		ART UNIT	PAPER NUMBER
OXNARD, CA	93036		2624	
			MAIL DATE	DELIVERY MODE
			07/15/2008	PAPER

## Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	10/796,880	YUAN ET AL.				
interview Summary	Examiner	Art Unit				
	SATH V. PERUNGAVOOR	2624				
All participants (applicant, applicant's representative, PTO	personnel):					
(1) <u>SATH V. PERUNGAVOOR</u> .	(3)					
(2) <u>Richard T. Lyon (Reg. No. 37,385)</u> .	(4)					
Date of Interview: 07 July 2008.						
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2) <mark> applicant's representative</mark>	e]				
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.					
Claim(s) discussed: <u>All</u> .						
Identification of prior art discussed: <u>Lin</u> .						
Agreement with respect to the claims f) was reached. g	ı)∏ was not reached. h)⊠ N	I/A.				
Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>Examiner and the applicant's representative discussed the claim rejections and the filed after final.</u>						
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no c allowable is available, a summary thereof must be attached	opy of the amendments that w					
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTE requirements on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM,	been filed, APP Y DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO			
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red				

Application No.

Applicant(s)